U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND **EMPLOYEE REPORT**

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

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1. File Number **U** - **689 Z**.

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2. Fiscal Year Covered From:

	1 / 1 / 2004 Through: 12 / 31 / 2004			
3. Name and address of person filing.	Name, file number, and address of labor organization.			
Name Robert LaFarga	Name Laborers' Local 507			
	Labor Organization File Number 020-346			
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any			
Street 3919 Paramount Blvd.	Street 3919 Paramount Blvd.			
City Lakewood	City Lakewood			
State California ZIP Code + 4 90712	State California ZIP Code + 4 90712			
5. Position in labor organization. Business Manager/ Secretary-T	reasur			
Enter appropriate data below If, during the past fiscal year, you or your spot (except as specified in the exclu	use or minor child directly or indirectly had any of the following interests sions set forth in the instructions):			
A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.				
Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.			
Name N/A	None			
Trade Name, if any:				
P.O. Box, Bldg., Room No., if any				
1.0. 500, 510g., 100m 100., 11 day	7.b. Amount.			
Street				
City	\$0			
State ZIP Code + 4				
Signature				
15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)				
Signed				
	On <u>\$ 12-05</u> (562) 421-9346 Date Telephone Number			

Name of Person Filing Robert LaFarga	File Number U-		
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.			
8. Name and address of Business (including trade name, if any). Name Union Bank Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 445 S. Figueroa Street City Los Angeles State California ZIP Code + 4 90071	9. Business deals with: a. Labor Organization b. Trust c. Employer		
10. If 9.b. or 9.c. is checked give trust or employer's name. Name Trade Name, if any: P.O. Box, Bldg., Room No., if any	11.a. Nature of such dealing. Commercial bankers and investment custodian. Fee for services paid to bank are earned on float on deposits in accounts.		
Street City	11.b. Approximate dollar value of such dealing. \$0 12.a. Nature of interest held or income received.		
State ZIP Code + 4	Sponsor filer in IUOE Local 12 golf tournament to benefit youth organization/ homeless shelters on 3/13/04.		
	12.b. Amount. \$35		
C. Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money			
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.		
Name			
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any			
Street			
City Company of the C			
State ZIP Code + 4			
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.		

	File Number U-
Name of Person Filing Robert LaFarga	riie Mullipei O-
o Robert Hararga	

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).	9. Business deals with:
Name Union Bank	😾 a. Labor Organization
Trade Name, if any:	[23]
P.O. Box, Bldg., Room No., if any	b. Trust
Street 445 S. Figueroa Street	c. Employer
City Los Angeles	
State California ZIP Code + 4 90071	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name	Commercial bankers and investment custodian. Fee for services paid to bank are earned on float on
Trade Name, if any:	deposits in accounts.
P.O. Box, Bldg., Room No., if any	
Street	
City	
State ZIP Code + 4	11.b. Approximate dollar value of such dealing. \$35
	12.a. Nature of interest held or income received.
	Sponsor filer in Sheet Metal Local 170 golf tournament to benefit Dollars Against Diabetes on 5/24/04
	12.b. Amount.

Name of Person Filing Robert LaFarga	File Number U-
o Robert Hararga	1

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

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8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Union Bank	a. Labor Organization	
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 445 S. Figueroa Street	c. Employer	
City Los Angeles		
State California ZIP Code + 4 90071		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name	Commercial bankers and investment custodian. F for services paid to bank are earned on float o	
Trade Name, if any:	deposits in accounts.	
P.O. Box, Bldg., Room No., if any		
Street		
City		
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	\$45
	12.a. Nature of interest held or income received.	
	Sponsor filer in Ca State Council tournament to benefit Laborers Sch 6/7/04.	
	12.b. Amount.	

Name of Person	Filing	Robert	LaFarga
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File Number U-

Part B Continuation Page

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	9. Business deals with:	
Name and address of Business (including trade name, if any).	3. Dusiness ueas with.	
Name Union Bank		
·	a. Labor Organization	·
Trade Name, if any:	STATE L. Towns	
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 445 S. Figueroa Street	c. Employer	
City Los Angeles		
State California ZIP Code + 4 90071		
10. If 9.b. or 9.c, is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name	Commercial bankers and investment	
	for services paid to bank are earn deposits in accounts.	ed on float on
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street		
City		
		Approximation of the second se
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	\$50
	12.a. Nature of interest held or income received.	
	Sponsor filer in Heartbeat of Holl	
	tournament to benefit the motion p television fund on 6/14/04.	olcture and
	12.b. Amount.	